County: Beaufort

Facility Type: Hospital or Institutional General Infirmary Facility Name County/Ownership Type Location Street Mailing/Billing Address Licensed Location City, State Licensee Units Administrator/Phone License Nbr/Expiration Date BEAUFORT MEMORIAL HOSPITAL Beaufort / County 197 955 RIBAUT RD 955 RIBAUT RD BEAUFORT, SC 29902-5454 FAC.#:843-522-5200 BEAUFORT, SC 29902-5454 TOOMEY, RICHARD K PH#: 843-522-5200 BEAUFORT COUNTY MEMORIAL HOSPITAL Facility Email: DCRAWFORD@BMHSC.ORG HTL-0026 / 11/30/2014 Licensed Beds: General: Rehab: 14 169 Psychiatric: 14 Substance Abuse: Neonatal Special Care: 5 Other Beds : NICU: 0 Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited Beaufort / Limited Liability Limited 93 HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-HILTON HEAD ISLAND, SC 29926-2738 HILTON HEAD HEALTH SYSTEM LP ONEIL, MARK PH#: 843-689-8206 HTL-0646 / 10/31/2014 Facility Email: Not on File Licensed Beds: General: 0 Rehab: 0 93 Psychiatric: Substance Abuse: Other Beds : NICU: 0 Neonatal Special Care: Certifications: Perinatal Level I, JCAHO Accredited Totals For Facility/License Type: Hospital or Institutional General Infirmary Number of Activities/Facilities licensed: 2 Number Licensed Units: 290 Number of Activities/Facilities licensed in county of Beaufort # Lics: 2

1

Number Licensed Units: 290

County: Charleston

Facility Type: Hospital or Institutional Gen	neral Infirmary	
Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BON SECOURS-ST FRANCIS XAVIER HOSPITAL	Charleston / Non-Profit Corporation	204
2095 HENRY TECKLENBURG DR	2095 HENRY TECKLENBURG DR	
CHARLESTON, SC 29414-5734 FAC.#:843-402-1000	CHARLESTON, SC 29414-5734	
CARROLL, ALLEN P PH#: 843-402-1006	BON SECOURS-ST FRANCIS XAVIER HOSPITAL INC	2
Facility Email: ALLEN.CARROLL@RSFH.COM	HTL-0750 / 07/31/2014	
Licensed Beds: General: 204 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Speci	al Care: 11	
Certifications:Trauma Center Level III, Perinata	al Level II, JCAHO Accredited	
CITADEL INFIRMARY	Charleston / State	38
171 MOULTRIE ST, CITADEL INFIRMARY	171 MOULTRIE ST, THE CITADEL	
CHARLESTON, SC 29409-0001 FAC.#:843-953-4827	CHARLESTON, SC 29409-0001	
CAPELL, CAREY M PH#: 843-953-6847	BOARD OF VISITORS THE CITADEL	
Facility Email: BPELHAM@CITADEL.EDU	HTL-0035 / 05/31/2014	
Licensed Beds: General: 38 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Speci	al Care: 0	
Certifications:None		
EAST COOPER MEDICAL CENTER	Charleston / Corporation	130
2000 HOSPITAL DR	2000 HOSPITAL DR	
MOUNT PLEASANT, SC 29464-3764 FAC.#:843-416-621	·	
ALEXANDER, JASON P PH#: 843-881-0100	EAST COOPER COMMUNITY HOSPITAL INC	
Facility Email: JASON.ALEXANDER@TENETHEALTH.COM	HTL-0447 / 03/31/2014	
Licensed Beds: General: 130 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Speci	al Care: 10	
Certifications: Abortions, Trauma Center Level I		40
HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON		49
9181 MEDCOM ST	9181 MEDCOM ST	
NORTH CHARLESTON, SC 29406-9184 FAC.#:843-820-7		
POWELL, TROY G PH#: 843-820-7777	TRIDENT NEUROSCIENCES CENTER LLC	
Facility Email: TR0Y.POWELL@HEALTHSOUTH.COM	HTL-0648 / 12/31/2014	
Licensed Beds: General: 0 Psychiatric: Other Beds: NICU: 0 Neonatal Speci	0 Rehab: 49 Substance Abuse: al Care: 0	0
- Certifications:JCAHO Accredited		
MOUNT PLEASANT HOSPITAL	Charleston / Non-Profit Corporation	85
3500 HWY 17 N	3510 HWY 17 N STE 200	
MOUNT PLEASANT, SC 29466-9123 FAC.#:843-724-295	4 MOUNT PLEASANT, SC 29466-8229	
SULLIVAN, JOHN PH#: 843-724-2954	ROPER ST FRANCIS MOUNT PLEASANT HOSPITAL	
Facility Email: JOHN.SULLIVAN@RSFH.COM	HTL-0909 / 10/31/2014	
Licensed Beds: General: 85 Psychiatric:		0
Other Beds: NICU: 0 Neonatal Speci		
Certifications:Perinatal Level I, JCAHO Accredit	ted	
	2 hlfactcc	.rdf

County: Charleston

Facility Type: Hospital or Institutional Gen	eral Infirmary	
Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MUSC MEDICAL CENTER	Charleston / District	709
169 ASHLEY AVE	169 ASHLEY AVE	
CHARLESTON, SC 29425-8905 FAC.#:843-792-3232	CHARLESTON, SC 29425-8905	
CAWLEY MD, PATRICK J PH#:	MEDICAL UNIVERSITY HOSPITAL AUTHORITY	
Facility Email: SMITHSTU@MUSC.EDU	HTL-0811 / 11/30/2014	
Licensed Beds: General: 604 Psychiatric:	82 Rehab: 0 Substance Abuse:	23
Other Beds: NICU: 16 Neonatal Specia	1 Care: 50	
Certifications: Abortions, Trauma Center Level I,	Perinatal Level III Regional, JCAHO Acc	credited
PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH	Charleston / Limited Liability	80
2777 SPEISSEGGER DR	2777 SPEISSEGGER DR	
NORTH CHARLESTON, SC 29405-8229 FAC.#:843-747-58	30 NORTH CHARLESTON, SC 29405-8229	
BAKER, SHARI PH#: 843-747-5830	PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LL	C
Facility Email: SHARI.BAKER@UHSINC.COM	HTL-0729 / 08/31/2014	
Licensed Beds: General: 0 Psychiatric:	70 Rehab: 0 Substance Abuse:	10
Other Beds: NICU: 0 Neonatal Specia	l Care: 0	
Certifications:JCAHO Accredited		
ROPER HOSPITAL	Charleston / Non-Profit Corporation	368
316 CALHOUN ST	316 CALHOUN ST	
CHARLESTON, SC 29401-1125 FAC.#:843-724-2901	CHARLESTON, SC 29401-1125	
SEVERANCE, MATTHEW J PH#: 843-724-2901	ROPER HOSPITAL INC	
Facility Email: MATT.SEVERANCE&RSFH.COM	HTL-0063 / 10/31/2014	
Licensed Beds: General: 316 Psychiatric:	0 Rehab: 52 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Specia	l Care: 0	
Certifications:Trauma Center Level III, JCAHO Acc	credited	
SHERIFF AL CANNON DETENTION CENTER	Charleston / County	22
3841 LEEDS AVE	3841 LEEDS AVE	
N CHARLESTON, SC 29405-7469 FAC.#:843-529-7300	NORTH CHARLESTON, SC 29405	
CASH, ASHLEY E PH#: 843-529-7332	CHARLESTON COUNTY SHERIFF'S OFFICE	
Facility Email: ACASH@CHARLESTONCOUNTY.ORG	HTL-0908 / 06/30/2014	
Licensed Beds: General: 22 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Specia	1 Care: 0	
Certifications:None		
TRIDENT MEDICAL CENTER	Charleston / Ltd. Liability	296
9330 MEDICAL PLAZA DR	9330 MEDICAL PLAZA DR	
N CHARLESTON, SC 29406-9104 FAC.#:843-847-4100	N CHARLESTON, SC 29406-9104	
GALATI, TODD PH#: 843-797-7000	TRIDENT MEDICAL CENTER LLC	
Facility Email: TODD.GALLATI@HCAHEALTHCARE.COM	HTL-0777 / 04/30/2014	
	0 Rehab: 0 Substance Abuse:	0
Licensed Beds: General: 296 Psychiatric:	o Reliab. o babbeance induse.	•
Licensed Beds: General: 296 Psychiatric: Other Beds: NICU: 0 Neonatal Specia		·

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name County/Ownership Type
Location Street Mailing/Billing Address Licensed
Location City, State Licensee Units

Administrator/Phone License Nbr/Expiration Date

VIBRA HOSPITAL OF CHARLESTON Charleston / Limited Liability 59

1200 HOSPITAL DR

MOUNT PLEASANT, SC 29464-3251 FAC.#:843-876-8340

MILLER, PAUL PH#: 843-876-8340 VIBRA HOSPITALOF CHARLESTON LLC

Facility Email: PAUL.MILLER@KINDRED.COM HTL-0764 / 08/31/2014

Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse: 0

Other Beds: NICU: 0 Neonatal Special Care: 0

Certifications: JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 11 Number Licensed Units 2,040

Number of Activities/Facilities licensed in county of <u>Charleston</u> # Lics: <u>11</u>

Number Licensed Units : 2,040

County: Colleton

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
COLLETON MEDICAL CENTER	Colleton / Corporation	135
501 ROBERTSON BLVD	501 ROBERTSON BLVD	
WALTERBORO, SC 29488-5714 FAC.#:843-782-2604	WALTERBORO, SC 29488-5714	
GRIFFIN, BRADLEY M PH#: 843-782-2604	WALTERBORO COMMUNITY HOSPITAL INC	

Facility Email: MARILYN.FRYAR@HCAHEALTHCARE.COM HTL-0405 / 03/31/2014

Licensed Beds: General: 102 Psychiatric: 19 Rehab: 14 Substance Abuse:

0 Neonatal Special Care: 0 Other Beds : NICU:

Facility Type: Hospital or Institutional General Infirmary

Certifications:Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: Hospital or	Institutional General Infirmary
Number of Activities/Facilities licensed:	1 Number Licensed Units: 135

Number of Activities/Facilities licensed in county of <u>Colleton</u> # Lics: 1 Number Licensed Units : 135

County: Dorchester

Facility Type: Hospital or Institutional General Infirmary Facility Name County/Ownership Type Location Street Mailing/Billing Address Licensed Location City, State Licensee Units Administrator/Phone License Nbr/Expiration Date LIEBER CORRECTIONAL INSTITUTION INFIRMARY Dorchester / State 10 136 WILBORN AVE PO BOX 210382, SCDOC-ACCOUNTS PAYABLE RIDGEVILLE, SC 29472-6351 FAC.#:803-896-3702 COLUMBIA, SC 29221-0382 CONNELLY RN, STAR PH#: SC DEPT OF CORRECTIONS Facility Email: Not on File HTL-0874 / 04/30/2014 Licensed Beds: General: 10 Psychiatric: 0 Rehab: 0 Substance Abuse: Neonatal Special Care: 0 Other Beds : NICU: 0 Certifications:None SUMMERVILLE MEDICAL CENTER Dorchester / Ltd. Liability 94 295 MIDLAND PKWY 295 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FAC.#:843-832-5101 SUMMERVILLE, SC 29485-8104 CAPUTO, LOUIS F PH#: 843-797-7000 TRIDENT MEDICAL CENTER LLC Facility Email: LOUIS.CAPUTO@HCAHEALTHCARE.COM HTL-0780 / 04/30/2014 0 Rehab: 0 Licensed Beds: General: 94 Psychiatric: Substance Abuse: Other Beds : NICU: 0 Neonatal Special Care: Certifications: Abortions, Perinatal Level II, JCAHO Accredited Totals For Facility/License Type: Hospital or Institutional General Infirmary Number of Activities/Facilities licensed: 2 Number Licensed Units:

Number of Activities/Facilities licensed in county of # Lics: 2 Dorchester Number Licensed Units : 104

County: Georgetown

Facility Type: Hospital or Institutional General Infirmary		
Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GEORGETOWN MEMORIAL HOSPITAL	Georgetown / Non-Profit Corporation	131
606 BLACK RIVER RD	PO BOX 421718	
GEORGETOWN, SC 29440-3368 FAC.#:843-527-7000	GEORGETOWN, SC 29442-4203	
BAILEY, BRUCE P PH#: 843-527-7000	GEORGETOWN MEMORIAL HOSPITAL INC	
Facility Email: TKISER@GEORGETOWNHOSPITALSYSTEM.ORG	HTL-0007 / 08/31/2014	
Licensed Beds: General: 131 Psychiatric: 0	Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Special (Care: 5	
Certifications:Perinatal Level II, JCAHO Accredited		
WACCAMAW COMMUNITY HOSPITAL	Georgetown / Non-Profit Corporation	167
4070 HWY 17 BYPASS	4070 HWY 17 BYPASS	
MURRELLS INLET, SC 29576-5033 FAC.#:843-652-1001	MURRELLS INLET, SC 29576-5033	
RESETAR, GAYLE L PH#: 843-651-8211	WACCAMAW COMMUNITY HOSPITAL (INC)	
Facility Email: GRESETAR@GEORGETOWNHOSPITALSYSTEM.ORG	HTL-0834 / 10/31/2014	
Licensed Beds: General: 124 Psychiatric: 0	Rehab: 43 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Special O	Care: 2	
Certifications:Perinatal Level II, JCAHO Accredited	I .	
Totals For Facility/License Type: Hospital or In	nstitutional General Infirmary	
Number of Activities/Facilities licensed:2	Number Licensed Units: 29	<u>8</u>
Number of Activities/Facilities licensed in county	of <u>Georgetown</u> # Lics:	2
	Number Licensed Units : 29	<u>8</u>

County: Horry

Facility Type: Hospital or Institutional G		
Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CONWAY HOSPITAL	Horry / Non-Profit Corporation	210
300 SINGLETON RIDGE RD	PO BOX 829	
CONWAY, SC 29526-9142 FAC.#:843-347-8114	CONWAY, SC 29528-0829	
CLAYTON, PHILIP A PH#: 843-347-8114	CONWAY HOSPITAL INC	
Facility Email: PCLAYTON@CMC-SC.COM	HTL-0083 / 05/31/2014	
Licensed Beds: General: 210 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Spec	cial Care: 6	
Certifications:Perinatal Level II		
GRAND STRAND REGIONAL MEDICAL CENTER	Horry / Ltd. Liability	269
809 82ND PKWY	809 82ND PKWY	
MYRTLE BEACH, SC 29572-4611 FAC.#:843-692-110	·	
WHITE, DOUG PH#: 843-692-1100	GRAND STRAND REGIONAL MEDICAL CENTER LLC	
Facility Email: DOUG.WHITE@HCAHEALTHCARE.COM	HTL-0770 / 04/30/2014	
Licensed Beds: General: 269 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Spec	cial Care: 2	
Certifications:Trauma Center Level III, Perina		
LIGHTHOUSE CARE CENTER OF CONWAY ACUTE CARE	Horry / Corporation	72
152 WACCAMAW MEDICAL PARK DR	152 WACCAMAW MEDICAL PARK DR	
CONWAY, SC 29526-8901 FAC.#:843-347-8871	CONWAY, SC 29526-8901	
RYBA, TOM PH#: 843-347-8871	HHC SOUTH CAROLINA INC	
Facility Email: TOM.RYBA@UHSINC.COM	HTL-0898 / 01/31/2014	
Licensed Beds: General: 0 Psychiatric:		13
Other Beds: NICU: 0 Neonatal Spec	cial Care: 0	
Certifications:JCAHO Accredited MCLEOD LORIS	Horry / Non-Profit Corporation	105
3655 MITCHELL ST	PO BOX 690001	103
LORIS, SC 29569-2844 FAC.#:843-716-7000	LORIS, SC 29569-9601	
•	MCLEOD LORIS SEACOAST HOSPITAL	
TINSLEY, EDWARD D PH#: 843-777-2855 Facility Email: AGREEN@LORISHEALTH.ORG		
-	HTL-0033 / 01/31/2014	0
Licensed Beds: General: 105 Psychiatric: Other Beds: NICU: 0 Neonatal Spe		0
Certifications:Perinatal Level I, JCAHO Accred	dited	
MCLEOD SEACOAST	Horry / Non-Profit Corporation	50
4000 HWY 9 E	PO BOX 690001	
LITTLE RIVER, SC 29566-7833 FAC.#:843-390-810	0 LORIS, SC 29569-9601	
TINSLEY, EDWARD D PH#: 843-777-2855	MCLEOD LORIS SEACOAST HOSPITAL	
Facility Email: AGREEN@LORISHEALTH.ORG	HTL-0910 / 01/31/2014	
Licensed Beds: General: 50 Psychiatric:	0 Rehab: 0 Substance Abuse:	0
Other Beds: NICU: 0 Neonatal Spec	cial Care: 0	
Certifications:JCAHO Accredited		
	8 hlfacto	1.5

December 3, 2013 South Carolina Department of Health & Environmental Control
Division of Health Licensing

County: Horry

Facility Type: Hospital or Institutional General Infirmary

Facility Name

Location Street

Location City, State

Administrator/Phone

County/Ownership Type

Mailing/Billing Address

Licensee

Units

License Nbr/Expiration Date

County: Jasper

Facility Type: Hospital or Institutional General Infirmary Facility Name County/Ownership Type Location Street Mailing/Billing Address Licensed Location City, State Licensee Units Administrator/Phone License Nbr/Expiration Date COASTAL CAROLINA HOSPITAL Jasper / Corporation 41 1000 MEDICAL CENTER DR 1445 ROSS AVE STE 1400 HARDEEVILLE, SC 29927-3446 FAC.#:843-784-8023 DALLAS, TX 75202-2703 TALBERT, BRADLEY S PH#: 843-876-8340 COASTAL CAROLINA MEDICAL CENTER INC Facility Email: BILL.MASTERTON@TENETHEALTH.COM HTL-0902 / 06/30/2014 Psychiatric: Licensed Beds: General: 0 Rehab: 0 41 Substance Abuse: Neonatal Special Care: 0 0 Other Beds : NICU: Certifications: Swing Bed Unit(s), JCAHO Accredited Totals For Facility/License Type: Hospital or Institutional General Infirmary Number of Activities/Facilities licensed: 1 Number Licensed Units: 41 Number of Activities/Facilities licensed in county of # Lics: 1 <u>Jasper</u> Number Licensed Units : 41

Report Totals

Total Number of Activities/Facilities licensed ______24 Total Number Licensed Units: ___3,614